

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam,  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 65-0380254 - N93000000109  
1. Corporation Name  
Pentecostal Movement Esmerina of Hollywood INC

APPROVED AND FILED  
95 MAY -1 AM 11:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

000001525410  
-06/28/95--01023--020  
\*\*\*130.00 \*\*\*130.00  
DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
6451 Pembroke Rd 2305 SW 61 Ave  
Hollywood, Fla 33023 Miramar, Fla 33023

3. Date Incorporated or Qualified 1-22-73 3a. Date of Last Report 94  
4. FEI Number 65 0380254 Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address  
21 6451 Pembroke Rd 26 2305 SW 61 Ave  
Suite, Apt. #, etc. Suits, Apt. #, etc.  
22 City & State 27 City & State  
23 Hollywood, Fla 28 Hollywood, Fla  
24 33023 25 Broward 29 33023 30 Broward

5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent  
Nidia Guzman  
2305 SW 61 Ave  
Miramar Hollywood, Fla  
33023

10. Name and Address of New Registered Agent  
B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3 City  
B4 City  
B5 Zip Code  
Consumers Certificate Exemption #  
Cert. Exemption # 16-05-261 896-55C  
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  
SIGNATURE: Nidia Guzman 1st Director 4/12/95  
Date

12. OFFICERS AND DIRECTORS

TITLE	Nidia Guzman
NAME	2305 SW 61 Ave
STREET ADDRESS	Miramar, Fla
CITY-ST-ZIP	
TITLE	Sara Santiago
NAME	6115 Buchanan St
STREET ADDRESS	Hollywood, Fla 33024
CITY-ST-ZIP	
TITLE	Miriam Quintana
NAME	6731 Johnson St
STREET ADDRESS	Hollywood, Fla #110 33024
CITY-ST-ZIP	
TITLE	Julio Guzman
NAME	2305 SW 61 Ave
STREET ADDRESS	Miramar, Fla 33023
CITY-ST-ZIP	
TITLE	Noelba Osorio
NAME	501 NE Mia Garden Drive
STREET ADDRESS	6343C N.W. Beh, Fla 33179
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1st Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP	phone 961-8160	
2.1 TITLE	Treasurer	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	Phone # 987-1367	
2.4 CITY-ST-ZIP		
3.1 TITLE	Secretary	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	phone 4 986-0780	
3.4 CITY-ST-ZIP		
4.1 TITLE	2nd Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	3rd Director	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Nidia Guzman Director 4/12/95 961-8160  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #